

Harney County Key Informant Report- July 2009

The Key Informant assessment technique is useful for obtaining a deeper understanding of underlying issues, silent majority and minority viewpoints.

77 Key Informant interviews were conducted in the Spring/Summer of 2009 to determine the important health issues facing Harney County. Interviews were conducted with people from the following areas; Burns, Hines, Crane, Drewsey, Frenchglen, and Fields; all within the Harney County Service Area.

The following report is a summary of findings reflecting attitudes, opinions and beliefs of participants. **The findings ARE NOT intended as a statement of fact and to consider them as such would be erroneous.**

The Key Informant Interviews followed a pre-determined question guide, and information presented in this report follows the guide's format. To help the reader understand the magnitude of the attitudes, opinions and beliefs, key words are presented in bold. The words are below and are displayed in order of magnitude.

Majority 51-

Most 41-

Many-27

Several-19

Some-9

Few-4

1. What do you think/perceive as the most important health care resource problem facing Harney county residents? How should it be solved?

Top Themes

- 1) Affordability – *Many*
- 2) Chemotherapy and Oncology Services - *Many*
- 3) More Services / Less Travel - *Several*
- 4) Dialysis – *Some*
- 5) Retaining and Recruiting Providers - *Some*
- 6) Rural Health / Outreach and Access Issues – *Some*
- 7) Healthcare system not good quality – *Few*
- 8) Inadequate Mental Health Resources – *Few*
- 9) Lack of Urgent Care / Minor Emergency Clinic – *Few*
- 10) Internal Hospital conflicts, politics affecting service delivery, quality - *Few*

Many Harney County respondents cited affordability as the most important health resource problem issue facing local citizens and as a much broader structural problem. Of these respondents, *several* specifically identified rapidly increasing health insurance premiums, pharmaceutical costs, and direct and indirect malpractice costs as salient issues impacting their lives and Harney County. All the respondents identified cost as the reason that people do not have health insurance or that existing businesses cannot offer it as a benefit or the evaporation of jobs continues to erode benefit availability. In another aspect of affordability, *many* felt that escalating provider costs, ranging from clinic and hospital services to mental health resources, are prohibiting access and subsequently utilization of health resources. *Several* respondents felt that focusing on a robust economic development platform that attracts living wage jobs with benefits would be a sound solution to address health insurance issues and health maintenance. An interesting paradox emerged with a *few* respondents advocating government intervention (universal public insurance, Medicare and prescription drug price caps, etc.); conversely a *few* respondents felt that further government intervention would further exacerbate the perceived affordability quagmire. Ultimately, the overwhelming, overriding theme among respondents in this category was the affordability issue and rising costs are crippling and the need for reform was urgent.

Many respondents felt the need for Chemotherapy and Oncology Services to be provided locally. *Most* of the respondents in this category had a strong conviction that the additional stress of traveling to Bend or Boise for chemotherapy was a tragic reality that should be rectified. The *majority* of respondents in this category advocated that chemotherapy services be implemented and delivered locally in some capacity. A *few* respondents were cognizant of the huge capital outlay and logistical obstacles and conceded chemotherapy and oncology services may be unattainable. Lastly, a *few* respondents reported that some Harney Countians diagnosed with cancer forgo treatment because they lack funding to make extended trips to Bend, Boise, etc.

“Affordability - Major Problem! - Insurance is corrupt. Benefits decrease, Premiums increase.”

“Lack of coverage for basic health maintenance (no resource) or insurance coverage for patients to be seen. Need more jobs that provide benefits.”

“Insurance went up 33.6% this year. A husband-wife went from \$700 to \$1277 a month. Things are out of control with prices. If the insurance companies and doctors don't work together better, government will take over then we are all in trouble.”

“Create a health insurance cooperative and work with providers to reduce costs.”

It was mentioned *several* residents that the local health care delivery system needed to expand services to alleviate travel costs and stress from having to travel outside the area for services and spend dollars in other communities. *The majority* of respondents in this category identified ophthalmologists (cataract surgery) as a service that they would prefer locally. *A few* mentioned very isolated, un-common services such as V-Bac pregnancy and few requested a full-time resident surgeon would be nice. *Some* residents also felt that dialysis was major need in the community that was currently being unmet, although, *many* respondents understood an intensive procedure if this magnitude may not be feasible in a comparatively small proportion of patients with this need. *Some* respondents felt that Harney County was facing a provider shortage and will continue to struggle with recruitment and retention of high quality medical providers vital to consistent, timely care.

2. What do you think/perceive as the most important health problem (health status) facing the Harney County area? How should it be solved?

Top Themes

- 1) Obesity - *Many*
- 2) Substance Abuse – *Many*
- 3) Diabetes - *Some*
- 4) Cancer - *Some*
- 5) Heart Disease - *Few*
- 6) Teen Pregnancy – *<Few*
- 7) Child Abuse - *<Few*
- 8) Diet Issues (Food Intake) – *<Few*
- 9) COPD - *<Few*
- 10) Mental Health Diseases - *<Few*

Many respondents felt that obesity and noted the correlation between overweight/obese conditions and chronic diseases (diabetes, heart disease, etc.) *Some* residents felt the unhealthy eating habits of a modern society and a non-nutritious school meal program are contributing to their notion of higher than average overweight/obese population. *Many* of the individuals interviewed identified substance abuse (primarily d=rug and alcohol) as increasingly concerning health issue plaguing Harney County. *Many* respondents felt that addressing the “root causes” of substance abuse such as unemployment, depression, seasonal affective disorder (long winters) through better funding and dissemination of counseling / coaching services. *A few* respondents felt that the criminal justice system and a punitive approach would better address this problem. *Some* residents cited higher than average cancer rates as an epidemic and major health status problem affecting Harney County. *The majority* of respondents felt cancer rates could be reduced through education a preventative measures, however, *a few* strongly suggested we conduct research to understand the drivers and causes of abnormal cancer rates.

“Drugs and alcohol, which is often used as a band-aid for underlying issues such as depression, unemployment, long winters, etc. CAT is looking into how too change cultural norms”

“The number of cancer patients. Take a look at environmetnal issues, types of cancers, review are the links to environment and types of cancers. Is there services that HDH can provide - has this been researched?”

3. What are your perceptions of the local hospital?

The *majority* of respondents reported they had a positive perception of the hospital. This overwhelming response centered around comments such as “We have it good here,” “Great services and very nice people,” and “Care that is given is exceptional relative to population size.” Conversely, *several* respondents had a negative personal perception of Harney District Hospital, however, many of the negative personal perceptions were isolated to specific areas such as, “Is mismanaged, but looks good,” “Other than lab, hospital doing good,” “Need to keep a surgeon.” However, *several* hold the view that Harney District Hospital is a “Pit-Stop before I go to Bend,” or expensive, or simply provides low quality services. Lastly, a *few* reported that they had mixed feelings about the hospital, essentially the “some good, some bad” scenario.

4) How do you think other members of the community perceive the hospital?

Many folks participating felt that their neighbors and fellow community members held a positive view of the hospital. Furthermore, *several* also felt other members of the community held a negative view of Harney District Hospital. Comments are varied, but some as profound as, “Some people are surprised that I go to the Dr. Here. Not aware that they can be treated here. (I always recommend someone local),” while *many* felt their neighbors negative view of hospital administration strongly influenced their unfavorable perception of the hospital. Lastly, a *few* reported that they had mixed feelings about the hospital, essentially the “some good, some bad” scenario.

5) In terms of quality of care; access; cost; physical plant; range of services; staff; administration; board of directors; what are your perceptions?

Top Hospital Issues

- 1) Positive Perception of Hospital - Majority
- 2) Staff s good/excellent – Many
- 3) Other members of community, positive perception - Many
- 4) Negative personal perception of hospital - Many
- 5) Physical Plant Good - Many
- 6) Quality of care Good - Many
- 7) Good Range of Services - Many
- 8) Good Access - Several
- 9) Negative Perception of Administration, Board - Several
- 10) Costs are too high, Good Administration - Several

Most respondents felt that the staff was either “excellent,” “good,” or “great.” Multiple comments abounded echoing, “Staff is wonderful,” “Staff is kind and considerate”, etc. Furthermore, *many* respondents reported they felt the physical plant, quality of care, and range of services was good. The comment, “What's done here is done well. All is well organized, service is great,” seemed to summarize the consensus on the above issue areas. *Several* felt the range of service was adequate or good. One respondent stated, “He felt

the range of services have greatly improved in the past number of years especially with the construction of the hospital and the purchase of more modern equipment. He was very complimentary of the physical therapy services adjoining the hospital." *Many* of the interviewees felt the cost of services, especially lab and imaging, were much higher than regional competitors (primarily Bend providers). One respondent felt ER services constituted a monopoly stating, "Cost-Negative. ER expenses too high for services received. Doc saw patient for 2 minutes and was billed \$700 total bill. Feel like hospital has us by short-hair." While *most* were vague, "Cost is not acceptable," other were more specific, "Cost is more expensive - Hernia operation double than at Bend," and "The costs on some tests she had run at the hospital turned out to be more expensive than they would have been in Bend." *Several* respondents the Board of Directors and Administration were performing well, "Administration is proactive and positive," conversely *several* were passionate about their dissatisfaction with one stating, "Admin ineffective and unresponsive. Admin is top-heavy. Boards of Directors are ignorant of situation beyond what admin tells them. Out of touch."

6) Physicians issues

a) Perception?

A *majority* of respondents had an excellent or good perception of the physicians in the community. The general consensus was that of skilled physicians, qualified, and caring group of four physicians relative to the community size. One respondent stated, "We are lucky to have such dedicated physicians. I think most of the community has confidence in these physicians." A *Few* respondents felt the physicians lacked proper bed-side manner and proper people skills to perform their duties effectively as seen in these comments, "More training in bed-side manner" and "Most seem to have very poor people skills." The *overwhelming majority* of respondents felt that the quality of care provided by the local doctors was good or excellent. Nearly *all* of the respondents reported that their provider (both M.D. and FNP) was local.

b) Cost, Access, Specialty Mix?

Many of the respondents mentioned or held the opinion that the cost of services provided was high. One mentioned, "Outrageous," while another exclaimed, "ouch." A *few* respondents mentioned that lab work and tests were expensive when asked under the physician cost category. Subsequently, it appears a *few* respondents do not delineate from hospital and physician costs. *Several* mentioned the current specialty-mix as being inadequate with one stating, "Specialty-mix is always a drive away it seems." With *many* respondents specifically mentioning the need more for more specialists in the area (OB/GYN, Dermatologists, Internal Medicine, etc.) Additionally *some* respondents felt that access was an issue with one stating, "Hard to get an appointment, too long to wait for appointment."

c) Number of providers?

Many respondents felt the need for more providers in Harney County with *several* individuals noting the current providers as being, "burned out," stretched too thin," "too many hats," and "overworked." The general consensus among respondents was 1-2 more

providers with at least one being a mid-level provider (FNP or PA). A *few* respondents mentioned how a “provider shortage” was directly impacting care via limited time spent with patients. The respondent stated, “Physicians don’t spend enough time with patients - “Like a cow in a chute.”

d) Perception of visiting providers?

Most of the respondents felt that the visiting providers rotating through Burns are of good quality and very skilled physicians. Furthermore, *many* noted the convenience of having top-quality physicians locally, minimizing travel, was “awesome.” *Some* of the respondents consistent with other areas of the interview tool felt the county and could use more providers coming to our area more frequently. One explained, “Feels the physicians are crowded for time since they are only here for a limited time period.” Conversely, *a few respondents* were dissatisfied with the people skills, attitude, and general bed-side manner of the specialists servicing the area.

7) Ambulance and Emergency Services

The *majority* of respondents felt the EMS service of Emergency Services was excellent overall with numerous comments referring to “high quality,” “well-trained” and “dependable.” A *few* respondents expressed their concern about the high cost, with one mentioning “Ambulance is out of control” and another expressing the need for alternate means of urgent care due to the high cost. The individual stated, “Cost a big factor for ER. Some alternate way to handle treatment. Need program to avoid ER for treatment of minor emergency problems.”

8) Mental Health Resources

Many respondents felt the mental health resources (primarily Harney Behavioral Health) were inadequate in fulfilling the needs of the Harney Service Area. *Several* respondents felt HBH was underfunded and meeting the needs with the resources available, however, it was still falling short in servicing a population that they perceived to be growing. *Several* respondents felt their was “No qualifications,” “Need a full-time Psychologists,” “Poor quality,” and “Limited affordability.” A *few* felt the stigma if mental health, coupled with a small community where the facility is highly visible was prohibiting proper utilization of services. One respondent explained the impact of limited resources on other healthcare delivery systems, “Need more resources. Acuity is way higher when they seek services [mental health] in other venues [ER, clinic, etc.]. Ultimately, *many* of the respondents had no experience or were unwilling to report experiences or perceptions of mental health.

9) Substance Abuse

Most respondents reported they had no experience or no perception of substance abuse resources in the service area. *Some* mentioned that that the services available were lacking in the number of providers and counselors addresses issues. One mentioned, “Limited high quality counselors and limited affordability.” A *few* mentioned the correlation between the magnitude of the problem and inferred the current state of resources, “Not doing a great job because the problem is large and reflects on the System and service providers.”

10) Nursing Home and Adult Foster Care:

Many of the respondents felt that the lack of Nursing Home as negatively affecting patient care and creating a burden, wedge between families as patients needing this service had to go to John Day, Bend, or Lakeview. One mentioned, "I would like too see more [Nursing Home] so family members can stay closer too each other." *Many* felt that the lack of a Nursing Home was "over-loading" the Aspens (Assisted Living) and adult-foster care facilities and taxing their capabilities to medically care for residents as they are not skilled nursing facilities. One Mentioned, "Since Harney County does not have a true Nursing Home, they feel that many of the Alzheimer's and Dementia patients are put into the Aspens. The Aspens was designed as an assisted living facility and is not staffed to provide the types of services these patients need." *Some* felt that the adult foster-care that was available (Ashley Manor, Heritage House) was excellent.

11) Assisted Living

Many felt the assisted living (The Aspens) was good or excellent "clean," "facility with good care given to those residing there." *Several* respondents reported they had no experience with the facility, while a *few* mentioned The Aspens was "badly understaffed" as the lack of a Nursing Home is placing an undue burden on them. One individual reported, "60 [residents] there and only 2 people on at night."

12) Senior Programs and Home Health and Hospice

Most respondents believed the Senior Programs operated by the Senior Center was generally excellent or good overall. One individual reported, "The one bright spot in our community," while another stated, "[I] feel the Harney County Senior Center provides amazing services for its seniors. Dial-a-Ride, Bus to Bend for doctors appointments, shopping, etc." *Some* respondents strongly felt the dial-a-ride services and senior bus program was an amazing, much needed service. However, a *few* felt that extended hours was needed to accommodate varied schedules. Home Health and Hospice was reported by *most* respondents to be superb with one individual stating, "Service was excellent, Husband called them his "angels."

13) Preventative Care/Health Promotion

Several felt that Health Promotion and Prevention activities were inadequate and needed improvement. *Several* respondents felt better marketing, more wellness and exercise options (free), and more emphasis should be placed on prevention rather than "treating symptoms." Conversely, *several* felt that the promotion activities and prevention services were good or adequate with *several* mentioning the Lions screening programs, HDH Health Fair as proactive measures to promote healthy living and emphasize prevention. On respondent explained, "Community-wide are good - Colonoscopy, Mammography - Accessible and publicized good."

14) Dental

Many respondents felt the local dental group was affordable, accessible, high quality, generally good overall. One mentioned, "She feels the dental care here is just fine. She and her husband both went elsewhere for their dental car, but have now switched to the local dental clinic. She is pleased that a periodontal specialist is now here on a limited

basis.” Some felt the need for more providers in the area to promote increased competition and prevent a “perceived” monopoly and alleviate long wait times. *Some* respondents felt the cost was high with one mentioning, “Costs are going too high!!” Additionally, some reported they had no experience with dentists or the local dentists. Additionally, *some* respondents reported they sought dental services out of the area with one stating, “I don’t like our options, I go out of town.”

15) Public Health

Most felt Public Health was proactive and prominent in community, with multiple comments complimenting their immunization, flu shot program, WIC, and family planning services. *Several* had no experience with their services and declined to comment.

16) Pharmacy

Most respondents felt the current Pharmacy structure (Safeway, Hospital, and Rite-Aid) was adequate. *Several* individuals felt the extended hours at Safeway were sorely needed and has helped substantially in accommodating busy work schedules. A few respondents felt the cost of prescription drugs was “out-of-control” and cheaper in Bend. Furthermore, a *few* respondents felt the turnover problems at Rite-Aid (pharmacists) was a problem and impacted their ability to get drugs.

17) Vision

Most respondents felt the current vision providers (Keady and Kraul) were adequate, with *several* specifically identifying Jennifer Keady as a “skilled” “wonderful” provider. One mentioned, “I love Jennifer Keady for my family eye care. If she was not here I would travel to Bend.” *Some* respondents felt there was a need for more providers, especially in the area of Ophthalmology and their ability to provide more comprehensive services and surgery. A *few* respondents indicated they used an out-of-area provider.

18) Alternative Providers

Many respondents indicated they have no experience with alternative providers and medicine. Of the *several* individuals that used these services, they were very satisfied with the quality and philosophy of local services, especially Dr. Johnson, D.C.

19) Healthcare for Children

Most respondents had no opinion or thoughts on the current state of children’s healthcare. *Some* felt the current services were lacking and the most common theme was the lack of funding for a school nurse.

20) Values, Culture influencing health care decision-making

Many felt that regional culture and local values influence decisions about how individuals approach and use health services and health status lifestyle choices. *Several* felt that the “cowboy mentality” is very prevalent and can be taken too far until a major health crisis issue emerges. Also, *many* felt that being a small, isolated rural town that has high percentage of low-income folks impacts how folks use health services. A *few* individuals

felt that Native Americans approach health decisions differently and the quality of drinking water is negatively affecting well water.

21) Others

The *vast majority* of respondents had no insight into this question of the “Other” services. *Some* felt that the HHOPE crisis center and domestic violence advocacy and house were absolutely great, but sorely underfunded.